

# **Preventive Health and Health Services Block Grant**

## **Indiana**

### **Indiana Improves Efficiency in Producing Important Vital Records**

#### **Public Health Problem (Issue)**

When the Administrator of a rural local health department in Indiana wants to evaluate the health of his community, the vital statistics maintained by the Indiana State Department of Health serve as a key resource of information. However, delays in obtaining birth and death information and making that information available to those who need it, like the local health department Administrator, can negatively impact such assessment and planning efforts, or can result in costly delays.

This was the case in Indiana, which was still utilizing a vital records system that relied heavily on a manual, paper process before launching a vital statistics modernization initiative, which was funded to a large extent by Preventive Health and Health Services Block Grant dollars.

#### **Taking Action (Intervention)**

The Indiana State Department of Health Vital Records Division implemented the Indiana Birth Registration System in January 2007 to report birth data electronically and is in the process of rolling out the electronic Indiana Death Registration System. The initiative is already paying off. A recent review by the National Center of Health Statistics shows the timeliness of both birth and death data reporting in Indiana is above the national standard.

The National Center of Health Statistics requires births be reported within 30 days and deaths within 60 days. On average, the Vital Records Division of the Indiana State Department of Health reported births within 18 days and deaths within 59 days during 2007. Since the electronic Indiana Death Registration System is still in the process of being rolled out, it is anticipated that the timeliness of Indiana's death data reporting will improve even more once it is fully functioning.

#### **Impact**

A wide range of public health organizations on the local, state, and national level use this data to evaluate the health of Hoosiers and develop effective outreach and intervention programs. The National Center of Health Statistics requires birth and death data to:

- Document the health status of a population and of important subgroups;
- Evaluate the impact of health policies and programs;
- Identify disparities in health status and use of health care by race/ethnicity, socio-economic status, region and other population characteristics;
- Monitor trends in health status and health care delivery;
- Provide information for making changes in public policies and programs;
- Recognize health problems; and
- Support biomedical and health services research.

By improving the timeliness of reporting these vital statistics, the various projects that rely on the availability of this information can proceed in a much more efficient and cost-effective manner. The Vital Records Division also serves approximately 60,000 citizens per year, providing birth and death certificates. The new electronic systems have helped reduce wait times and improve the quality of customer service for these citizens who come to the Indiana State Department of Health seeking these certificates.

## Footnotes

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**Healthy People Objective**

Public Health Access to Information and Surveillance Data

**PHHS Block Grant Funding**

unknown

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**For more information on the**

**PHHS Block Grant, go to**

[www.cdc.gov/phhsblockgrant](http://www.cdc.gov/phhsblockgrant)

**For more information on**

**Healthy People, go to** [www.healthypeople.gov](http://www.healthypeople.gov)

**PHHS Block Grant Supports**

**Indiana Healthy People Priorities**

The PHHS Block Grant provides flexible funding that states can use to prevent and control chronic diseases, respond quickly to outbreaks of infections and waterborne diseases, and address their specific public health needs. States can align their programs with health objectives from [Healthy People](#).

Indiana uses its funds to address 14 health objective priorities, including

- Cardiovascular Health.
- Community Water Fluoridation.
- Accredited Public Health Agencies.
- Public Health Agency Quality Improvement Program.
- Health Improvement Plans.

For a complete list of funded health objectives, go to

<http://www.cdc.gov/phhsblockgrant/stateHPprior.htm>.